

AUG 23 2006

<b>FACSIMILE TRANSMITTAL FORM</b>	Application Number	10/648094
	Confirmation Number	2746
	Filing Date	August 26, 2003
	First Named Inventor	Mann, Lawrence J.
	Examiner Name	
Fax: 571-273-8300	Attorney Docket Number	56319US006
Total Number of Pages in This Submission: <u>12</u>		
Date: <u>Aug 23, 2006</u>		Attorney for Applicant: Daniel D. Biesterveld

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Amendment Transmittal	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Petition to Convert a Provisional Application	<input type="checkbox"/> Appeal Communication to Technology Center (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosures:
<input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR § 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts under 35 USC 371 in US Designated/ Elected Office (DO/EO/US)	<input type="checkbox"/> Request for Refund	
	<input type="checkbox"/> Request for Continued Examination (RCE) Transmittal	
<input type="checkbox"/> Drawings	<input type="checkbox"/> After Allowance Communication to Technology Center	
REMARKS:		

THE INFORMATION CONTAINED IN THIS FACSIMILE TRANSMISSION  
MAY CONTAIN CONFIDENTIAL OR LEGALLY PRIVILEGED INFORMATION  
INTENDED ONLY FOR THE PERSON OR ENTITY NAMED BELOW.

If you are not the intended recipient, please do not read, use, disclose, distribute or copy this transmission.  
If this transmission was received in error, please immediately notify me by telephone directly at 651-737-3193 or 651-733-1500, and we will arrange for its return at no cost to you.

BEST AVAILABLE COPY